

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WESTERN REPRESENTATION PAC

ADDRESS (number and street) ▼

4856 E. Baseline Rd. Suite 104

☐ Check if different than previously reported. (ACC)

Mesa

AZ

85206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00461772

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
06 01 2012

through

M M M / D D D / Y Y Y Y Y Y
06 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer

Dan Backer

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 20 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WESTERN REPRESENTATION PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		15764.54
(b) Cash on Hand at Beginning of Reporting Period.....	54165.36	
(c) Total Receipts (from Line 19)	8301.03	245378.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	62466.39	261143.33
7. Total Disbursements (from Line 31)	35959.16	234636.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26507.23	26507.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WESTERN REPRESENTATION PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 06 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1730.00

43661.00

(ii) Unitemized

6531.03

200079.29

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

8261.03

243740.29

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

8261.03

243740.29

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

25.50

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

40.00

1613.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

8301.03

245378.79

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

8301.03

245378.79

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	27257.23	186460.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27257.23	186460.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	27500.00
24. Independent Expenditures (use Schedule E)	2700.00	13804.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1825.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1825.00
29. Other Disbursements	5001.93	5046.88
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35959.16	234636.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35959.16	234636.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8261.03	243740.29
34. Total Contribution Refunds (from Line 28(d))	0.00	1825.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8261.03	241915.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	27257.23	186460.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	25.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	27257.23	186434.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. ADELE BINDER

Mailing Address 11111 SANTA MONICA Ste 1850
 SUITE 1850

City State Zip Code
 LOS ANGELES CA 90025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 19 / 2012

Transaction ID : SA11AI.51221

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ralph Clinard

Mailing Address 3306 Chartreuse Way

City State Zip Code
 Houston TX 77082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 19 / 2012

Transaction ID : SA11AI.51175

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Ralph Clinard

Mailing Address 3306 Chartreuse Way

City State Zip Code
 Houston TX 77082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 28 / 2012

Transaction ID : SA11AI.51174

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. FRANK DEGANAH

Mailing Address 20 Ocean Club Drive

City

Amelia Island

State

FL

Zip Code

32034

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 17 / 2012

Transaction ID : SA11AI.51022

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Wendy Kilheffer

Mailing Address 247 Key Deer Blvd

City

Big Pine Key

State

FL

Zip Code

33043

FEC ID number of contributing
federal political committee.

C

Name of Employer

LKMC

Occupation

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 18 / 2012

Transaction ID : SA11AI.51032

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Wendy Kolokotronis

Mailing Address 4236 Woodleigh Lane

City

La Canada Flintri

State

CA

Zip Code

91012

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

06 / 19 / 2012

Transaction ID : SA11AI.51224

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1025.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. Lynn Kornblum

Mailing Address 2425 Kings Highway, Apt. E-18

City State Zip Code
 Brooklyn NY 11229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 09 / 2012

Transaction ID : SA11AI.50947

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ed Micheli

Mailing Address P. O. Box 2177

City State Zip Code
 Windsor CA 95492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 19 / 2012

Transaction ID : SA11AI.51258

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Robert Morasse

Mailing Address 217 Willowood drive

City State Zip Code
 Rochester NY 14612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

First Consulting

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
 06 / 03 / 2012

Transaction ID : SA11AI.50959

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. Susan Roll

Mailing Address 10725 Cranks Road

City
culver city

State
CA

Zip Code
90230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2012

Transaction ID : SA11AI.51222

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MANNY SOUSA

Mailing Address 201 SHELIN DR

City
HAVANA

State
FL

Zip Code
32333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

US NAVY

AVIATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 04 / 2012

Transaction ID : SA11AI.51027

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. MANNY SOUSA

Mailing Address 201 SHELIN DR

City
HAVANA

State
FL

Zip Code
32333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

US NAVY

AVIATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

06 / 18 / 2012

Transaction ID : SA11AI.51026

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. MANNY SOUSA

Mailing Address 201 SHELIN DR

City
HAVANA

State Zip Code
FL 32333

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

AVIATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

06 / 19 / 2012

Transaction ID : SA11AI.51025

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Donald M Spencer

Mailing Address 2180 Sparrow Ct

City
Sarasota

State Zip Code
FL 34239

FEC ID number of contributing
federal political committee.

C

Name of Employer

JRL Ventures, Inc

Occupation

executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 18 / 2012

Transaction ID : SA11AI.51050

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. maurice talbot

Mailing Address 144 weyants lane

City
newburgh

State Zip Code
NY 12550

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 20 / 2012

Transaction ID : SA11AI.50958

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 21

(check only one)

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. dominic toscani

Mailing Address 700 hobbs rd.

City State Zip Code
 wayne PA 19087

FEC ID number of contributing federal political committee.

C

Name of Employer
 ret.

Occupation
 ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 09 / 2012

Transaction ID : SA11AI.50972

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. dominic toscani

Mailing Address 700 hobbs rd.

City State Zip Code
 wayne PA 19087

FEC ID number of contributing federal political committee.

C

Name of Employer
 ret.

Occupation
 ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2012

Transaction ID : SA11AI.50971

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

1730.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. Apple Computer

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	1	2		

Mailing Address 6605 Las Vegas Blvd S

City	State	Zip Code
Las Vegas	NV	89119

Transaction ID : SB21B.50901Purpose of Disbursement
Office equip

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1404.22

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. BEST BUY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	2		

Mailing Address

City	State	Zip Code
Sacramento	CA	

Transaction ID : SB21B.50915Purpose of Disbursement
Office equip

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

323.24

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Conservative Leadership Conference

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	1	2		

Mailing Address 1 South Main Street

City	State	Zip Code
Las Vegas	NV	89101

Transaction ID : SB21B.50882Purpose of Disbursement
Conservative Leadership Conference Sponsorship

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2727.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies

Mailing Address PO Box 75021

City Washington State DC Zip Code 20013

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2012
Transaction ID : SB21B.50868

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Dustin Stockton

Mailing Address 15959 Booth Cir

City Leander State TX Zip Code 78641

Purpose of Disbursement
Software/hardware purchase

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2012
Transaction ID : SB21B.50873

Amount of Each Disbursement this Period

2983.00

Full Name (Last, First, Middle Initial)

C. Jacob Hawkins

Mailing Address 314 Etowah Dr

City Cartersville State GA Zip Code 30130

Purpose of Disbursement
payroll

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2012
Transaction ID : SB21B.50875

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6983.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. Plaza Hotel

Mailing Address 1 South Main Street

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Hotel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2012
Transaction ID : SB21B.50888

Amount of Each Disbursement this Period

223.73

Full Name (Last, First, Middle Initial)

B. Rio Hotel

Mailing Address 3700 W Flamingo Rd

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement
Hotel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2012
Transaction ID : SB21B.50893

Amount of Each Disbursement this Period

237.19

Full Name (Last, First, Middle Initial)

C. Roger Stockton

Mailing Address 1811 Newman Pl

City Carson City State NV Zip Code 89703

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2012
Transaction ID : SB21B.50867

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

760.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36647 - 1CR

City State Zip Code
Dallas TX 75235
Purpose of Disbursement
Airline

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2012
Transaction ID : SB21B.50878

Amount of Each Disbursement this Period

481.60

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address P.O. Box 36647 - 1CR

City State Zip Code
Dallas TX 75235
Purpose of Disbursement
Airline

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 08 2012
Transaction ID : SB21B.50886

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address P.O. Box 36647 - 1CR

City State Zip Code
Dallas TX 75235
Purpose of Disbursement
Airline

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 20 2012
Transaction ID : SB21B.50906

Amount of Each Disbursement this Period

401.60

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

888.20

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

WESTERN REPRESENTATION PAC

A. Venetian Hotel

Date of Disbursement

Transaction ID : SB21B.50904

002

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

464.70

Full Name (Last, First, Middle Initial)

B. Venetian Hotel

Mailing Address 3355 Las Vegas Blvd

Date of Disbursement

City	State	Zip Code
Las Vegas	NV	89109

Transaction ID : SB21B.50905

002

Candidate Name

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

186.07

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
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77	78
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83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

650.77

26128.95

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

WESTERN REPRESENTATION PAC

A. MARTHA ZOLLER FOR CONGRESS

Transaction ID : SB23.50871

011

1000.00

Category/
Type

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WESTERN REPRESENTATION PAC

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 N. First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
CAREY ACCOUNT PAYPAL

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2012

Transaction ID : SB29.50854

Amount of Each Disbursement this Period

1.93

Full Name (Last, First, Middle Initial)

B. Wisconsin Club for Growth

Mailing Address 1223 W Main St #304

City	State	Zip Code
Sun Prairie	WI	53590

Purpose of Disbursement
In support of Gov. Scott Walker

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2012

Transaction ID : SB29.51318

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5001.93

5001.93

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 21
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC			FEC IDENTIFICATION NUMBER ▼ C C00461772		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name (Last, First, Middle Initial) of Payee KXNT Radio			Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> 06 / 04 / 2012		
Mailing Address 7255 S Tenaya Way, Ste 100			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">2700.00</div>		
City Las Vegas State NV Zip Code 89113		Transaction ID : SE.48727			
Purpose of Expenditure Independent Expenditure radio buy		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 04		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARBARA CEGAVSKE			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2700.00</div>			2012		
Full Name (Last, First, Middle Initial) of Payee			Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div>		
Mailing Address			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>		
City State Zip Code		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Purpose of Expenditure		Category/ Type	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate Supported or Opposed by Expenditure:					
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>					
(a) SUBTOTAL of Itemized Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px;">2700.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures			<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px;">2700.00</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Dan Backer		[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> 07 / 20 / 2012	